



Model EMS Clinical Guidelines, Version 3 #693JJ92050001

National EMS Advisory Council

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Funding

- Funded through a Cooperative Agreement
- National Highway Traffic Safety Administration (NHTSA) Office of Emergency Medical Services
- Health Resources and Services Administration (HRSA), Maternal and Child Health Bureau – Emergency Medical Services for Children (EMSC)

Historical Development and Purpose

- Purpose:
 - “To help state EMS systems ensure a more standardized approach to the practice of patient care, and to encompass evidence-based guidelines (EBG) as they are developed.”
- Inaugural edition released in 2014
- Revised in 2017
- Third edition in 2022

Co-PI's and Technical Expert Panel Organizations

- Co-principal Investigators:
 - Dr. Carol Cunningham
 - Dr. Richard Kamin
- NASEMSO Medical Directors Council
- NASEMSO Data Managers Council
- National Association of EMS Physicians (NAEMSP)
- American College of Emergency Physicians (ACEP)
- American Academy of Pediatrics – Committee on Pediatric Emergency Medicine (AAP – COPEM)
- American College of Surgeons – Committee on Trauma (ACS-COT)
- Air Medical Physician Association (AMPA)
- American Academy of Emergency Medicine (AAEM)



Conduct baseline assessment to determine extent of adoption, improvements needed and how to improve dissemination and use.



Convene Technical Expert Panel to include representatives of national EMS physician organizations.



Create editorial rules and conventions manual to assure conformity to a single presentation style and to include log of changes between major updates.



Draft revisions and additions to Model Guidelines, V 2.1; solicit feedback from EMS community and medical specialists.



Finalize Model Guidelines V3 after consideration of feedback from EMS community and expert reviewers.

Project Goals

- A total of 25 state EMS Offices responded to the survey, with 21 responses from the State EMS Director, 12 respondents in other roles, and one State EMS Medical Director
- 28% of the respondents indicated that their state had incorporated all or part of the Guidelines into their statewide protocols
- 38% indicating that the Guidelines were utilized as a reference document.
- Three respondents indicated that they were unaware of the Guidelines
- 72% of respondents indicated that they were satisfied with the amount of detail in the Guidelines
- Multiple suggestions for additional guidelines or for formatting and editorial changes were received

Key findings from the State EMS Office assessment



- 36% of the stakeholders requesting an editable version of the Guidelines indicated that they serve in a role **other than an agency administrator.**
 - Medical Directors, Educators, quality improvement personnel, and researchers.
- 72% of respondents indicated that the Guidelines have been incorporated in their entirety or in part in their statewide patient care protocols.
- 34% of respondents indicated that they had learned of the Guidelines through communication with NASEMSO
- 22% indicating they had received communication regarding the Guidelines from their state EMS Office
- Multiple suggestions for new guidelines (some duplication)
- Multiple suggestions were received related to formatting, style, and other editorial recommendations.

Key findings from the stakeholder assessment

Key Outcomes

- A 407 page reference document for use by all EMS agencies and their medical directors nationwide based on **best available medical evidence and expert clinical consensus**, to include an extensive review by pediatric and pharmacy specialists to ensure **accuracy and appropriateness**.
- Inclusion of **multiple new guidelines** and revision of existing guidelines to **reflect current field practice**.
- **Inclusion and revision of language to address topics of cultural importance** such as health equity, trafficking of persons, and the medical management of behavioral health patients
- A **high level of engagement** by stakeholders through the document drafting and public comment process.

Key Outcomes

- **New guidelines in this version:**
 - Brief Resolved Unexplained Event (BRUE) and Acute Events in Infants
 - Resuscitation in Traumatic Cardiac Arrest
 - Tracheostomy Management
 - Trauma Mass Casualty Incident
 - 2022 National Guideline for the Field Triage of Injured Patients
 - American College of Surgeons – Committee on Trauma (ACS-COT)



- Available on the NASEMSO Website at:
<https://nasemso.org/projects/model-ems-clinical-guidelines/>
- For more information or to request the National Model EMS Clinical Guidelines in editable Word format please contact:

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